

County: Milwaukee
CHRISTOPHER EAST HEALTH AND REHABILITATION
1132 EAST KNAPP STREET

Facility ID: 7610

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MILWAUKEE 53202 Phone: (414) 273-3560
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 154
Total Licensed Bed Capacity (12/31/01): 208
Number of Residents on 12/31/01: 121

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 122

Corporation
Skilled
No
Yes
Yes
122

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			%
Home Health Care	No					1 - 4 Years			65.3
Supp. Home Care-Personal Care	No					More Than 4 Years			19.8
Supp. Home Care-Household Services	No	Developmental Disabilities	4.1	Under 65	37.2				14.9
Day Services	No	Mental Illness (Org./Psy)	13.2	65 - 74	20.7				-----
Respite Care	Yes	Mental Illness (Other)	26.4	75 - 84	21.5				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	3.3	85 - 94	19.0	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.5	95 & Over	1.7	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	2.5		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	27.3	65 & Over	62.8	-----			
Transportation	No	Cerebrovascular	8.3		-----	RNs			9.4
Referral Service	No	Diabetes	5.0	Sex	%	LPNs			12.8
Other Services	No	Respiratory	4.1		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	3.3	Male	35.5	Aides, & Orderlies			
Mentally Ill	No		-----	Female	64.5				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	Yes				100.0				

Method of Reimbursement

	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care					
			Per Di em (\$)			Per Di em (\$)			Per Di em (\$)			Per Di em (\$)			Per Di em (\$)			Per Di em (\$)	Total Resi - dents	% Of All
Level of Care	No.	%		No.	%		No.	%		No.	%		No.	%		No.	%			
Int. Skilled Care	0	0.0	0	7	6.9	132	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	5.8
Skilled Care	15	100.0	265	86	85.1	112	0	0.0	0	2	100.0	145	1	100.0	112	2	100.0	270	106	87.6
Intermediate	---	---	---	7	6.9	93	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	5.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	1	1.0	167	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.8
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	15	100.0		101	100.0		0	0.0		2	100.0		1	100.0		2	100.0		121	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	1.6	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	1.2	Bathing	9.1	53.7	37.2	121
Other Nursing Homes	2.4	Dressing	18.2	47.1	34.7	121
Acute Care Hospitals	91.9	Transferring	28.1	33.9	38.0	121
Psych. Hosp. -MR/DD Facilities	2.8	Toilet Use	26.4	37.2	36.4	121
Rehabilitation Hospitals	0.0	Eating	58.7	24.8	16.5	121
Other Locations	0.0	*****				
Total Number of Admissions	246	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	13.2	Receiving Respiratory Care		14.0
Private Home/No Home Health	12.0	Occ/Freq. Incontinent of Bladder	47.1	Receiving Tracheostomy Care		1.7
Private Home/With Home Health	10.0	Occ/Freq. Incontinent of Bowel	35.5	Receiving Suctioning		2.5
Other Nursing Homes	1.6			Receiving Ostomy Care		1.7
Acute Care Hospitals	58.4	Mobility		Receiving Tube Feeding		10.7
Psych. Hosp. -MR/DD Facilities	3.2	Physically Restrained	5.0	Receiving Mechanically Altered Diets		11.6
Rehabilitation Hospitals	0.0					
Other Locations	3.2	Skin Care		Other Resident Characteristics		
Deaths	11.6	With Pressure Sores	8.3	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	2.5	Medications		
(Including Deaths)	250			Receiving Psychoactive Drugs		62.8

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 200+ Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	57.7	77.1	0.75	80.2	0.72	82.7	0.70	84.6	0.68
Current Residents from In-County	94.2	82.7	1.14	83.3	1.13	85.3	1.10	77.0	1.22
Admissions from In-County, Still Residing	30.5	19.1	1.59	27.4	1.11	21.2	1.44	20.8	1.47
Admissions/Average Daily Census	201.6	173.2	1.16	94.3	2.14	148.4	1.36	128.9	1.56
Discharges/Average Daily Census	204.9	173.8	1.18	98.8	2.07	150.4	1.36	130.0	1.58
Discharges To Private Residence/Average Daily Census	45.1	71.5	0.63	31.6	1.42	58.0	0.78	52.8	0.85
Residents Receiving Skilled Care	93.4	92.8	1.01	89.7	1.04	91.7	1.02	85.3	1.09
Residents Aged 65 and Older	62.8	86.6	0.73	90.1	0.70	91.6	0.69	87.5	0.72
Title 19 (Medicaid) Funded Residents	83.5	71.1	1.17	71.6	1.17	64.4	1.30	68.7	1.22
Private Pay Funded Residents	1.7	13.9	0.12	19.1	0.09	23.8	0.07	22.0	0.08
Developmentally Disabled Residents	4.1	1.3	3.08	0.8	4.96	0.9	4.40	7.6	0.54
Mentally Ill Residents	39.7	32.5	1.22	35.4	1.12	32.2	1.23	33.8	1.17
General Medical Service Residents	3.3	20.2	0.16	20.3	0.16	23.2	0.14	19.4	0.17
Impaired ADL (Mean)	52.6	52.6	1.00	51.8	1.02	51.3	1.02	49.3	1.07
Psychological Problems	62.8	48.8	1.29	47.7	1.32	50.5	1.24	51.9	1.21
Nursing Care Required (Mean)	6.6	7.3	0.90	7.3	0.90	7.2	0.92	7.3	0.90